

JC20 Rec'd PCT/PTO 10 MAY 2005

**Application Data Sheet****Application Information**

Application Number::

Filing Date::

Application Type::

US National Phase

Subject Matter::

Utility

Suggested Classification::

Suggested Group Art Unit::

Title::

**PACKAGED ELECTRONIC COMPONENTS FOR  
APPLICATIONS AT MILLIMETRIC  
FREQUENCIES**

Attorney Docket Number::

4590-397

Request for Early Publication::

Request for Non-Publication::

Suggested Drawing Figure::

2

Total Drawing Sheets::

1

**Applicant Information**

Applicant Authority Type::

Inventor

Primary Citizenship Country::

France

Status::

Given Name::

Marc

Middle Name::

Family Name::

CAMIADE

Name Suffix::

City of Residence::

Bure-Sur-Yvette

State or Province of Residence::

Country of Residence::

France

Street of Mailing Address::

5, rue Modigliani

City of Mailing Address::

Bure-Sur-Yvette

Postal or Zip Code::

91440

Applicant Authority Type:: **Inventor**  
Primary Citizenship Country:: **France**  
Status::  
Given Name:: **Denis**  
Middle Name::  
Family Name:: **DOMNESQUE**  
Name Suffix::  
City of Residence:: **Orsay**  
State or Province of Residence::  
Country of Residence:: **France**  
Street of Mailing Address:: **69, rue de Paris**  
City of Mailing Address:: **Orsay**  
Postal or Zip Code:: **91400**

Applicant Authority Type:: **Inventor**  
Primary Citizenship Country:: **France**  
Status::  
Given Name:: **Klaus**  
Middle Name::  
Family Name:: **BEILENHOF**  
Name Suffix::  
City of Residence:: **Gif-Sur-Yvette**  
State or Province of Residence::  
Country of Residence:: **France**  
Street of Mailing Address:: **15, Rue Juliette Adam-Bâtiment A**  
City of Mailing Address:: **Gif-Sur-Yvette**  
Postal or Zip Code:: **91190**

### **Correspondence Information**

Correspondence Customer No:: **33308**  
Phone Number:: **(703) 684-1111**  
Fax Number:: **(703) 518-5499**

E-Mail Address::

### **Representative Information**

Representative Customer Number::

**Representative Designation:: Registration Number:: Representative Name::**

*Primary or Associate*

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

### **Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
<b>FR</b>	<b>0214684</b>	<b>November 22, 2002</b>	<b>Yes</b>
	<b>PCT/EP2003/050846</b>	<b>November 18, 2003</b>	<b>Yes</b>

### **Assignee Information**

Assignee Name:: **UNITED MONOLITHIC SEMICONDUCTORS  
SAS**

Street of Mailing Address:: **Route Départementale 128**

City of Mailing Address:: **Orsay Cedex**

State of Mailing Address::

Country of Mailing Address:: **France**

Postal or Zip Code:: **91401**